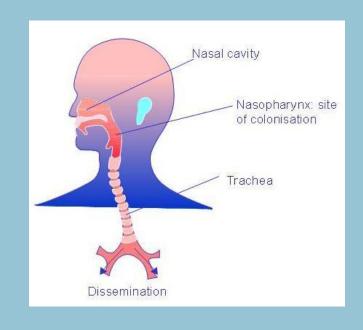
Application of novel technologies to improve access to vaccines in developing countries



Douglas Holtzman
Senior Program Officer
Bill & Melinda Gates Foundation

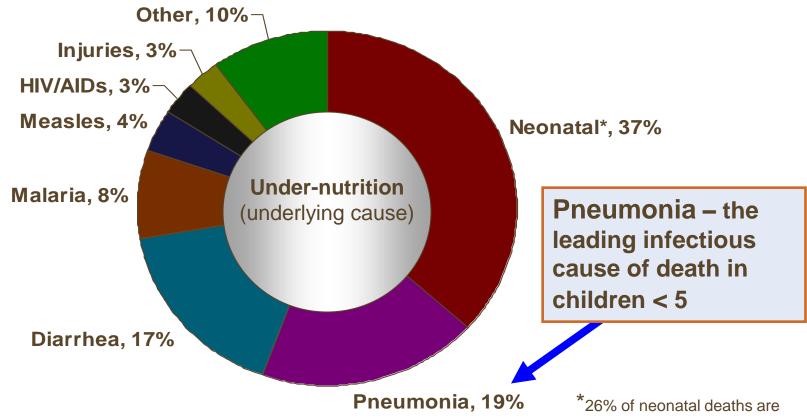
International Vaccine Technology Workshop September 18th, Hyderabad India



Outline

- Pneumonia, child health and vaccines
- The challenge of seasonal and pandemic influenza

Under 5 Child Mortality Global Distribution of Cause Specific Child Deaths



Source: 2005 World Health Report

*26% of neonatal deaths are due to severe infections such as pneumonia, meningitis, sepsis/septicaemia, etc

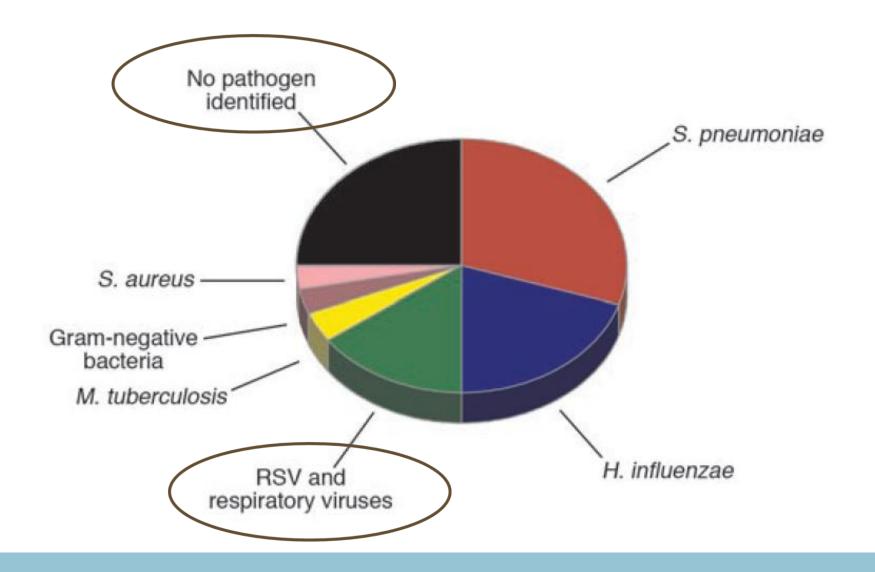
Every year, pneumonia causes nearly two million deaths in children under 5

More than AIDS, malaria and measles combined



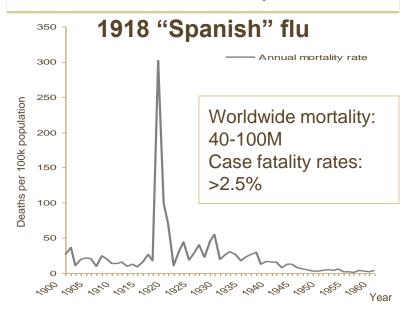
Source: UNICEF, 2006

Microbial Causes of Pneumonia



Seasonal and Pandemic Influenza

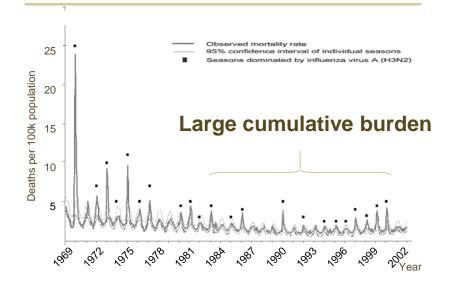
USA annual influenza mortality, 1900-1960

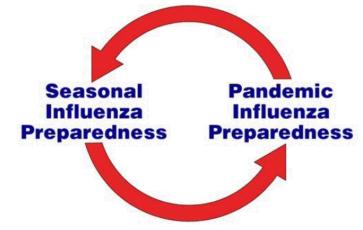


World Health Organization Pandemic Phases

Phases	Phase Description	Level
Inter-Pandemic Phase	Low Risk of Human Cases	1
New Virus in Animals, No Human Cases	Higher Risk of Human Cases	2
Pandemic Alert	No or Very Limited Human-to-Human Transmission	3
New Virus Causes Human Cases	Evidence of Increased Human-to-Human Transmission	4
	Evidence of Significant Human-to-Human Transmission	5
Pandemic	Efficient and Sustained Human-to-Human Transmission	6

Italy monthly influenza mortality, 1969-2002





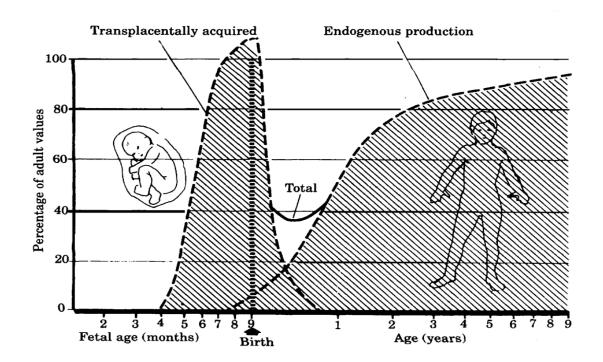
The Challenge:

Capacity for production of seasonal vaccine can not cope with pandemic need therefore:

- Increase seasonal use
- Think ahead of the virus
- Increase speed/scale of production through new technologies (multi-use)

Mother's Gift Study

Immunizing Mothers Prevents Influenza in Infants

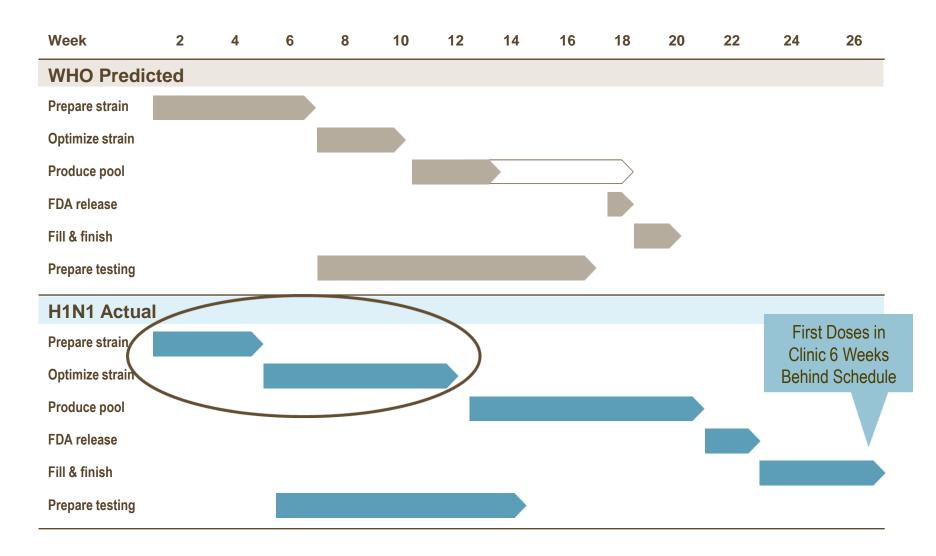




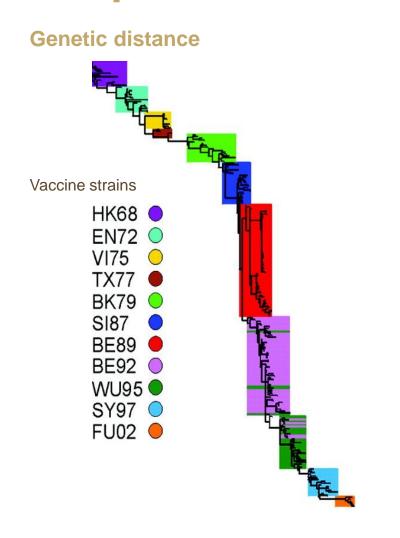
Flu vaccine reduces the rates of respiratory illness with fever

Infants - 34% reduction Mothers - 63% reduction

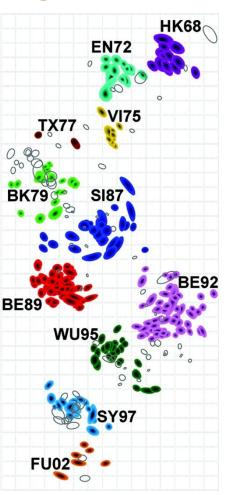
H1N1 Vaccine Production Timeline



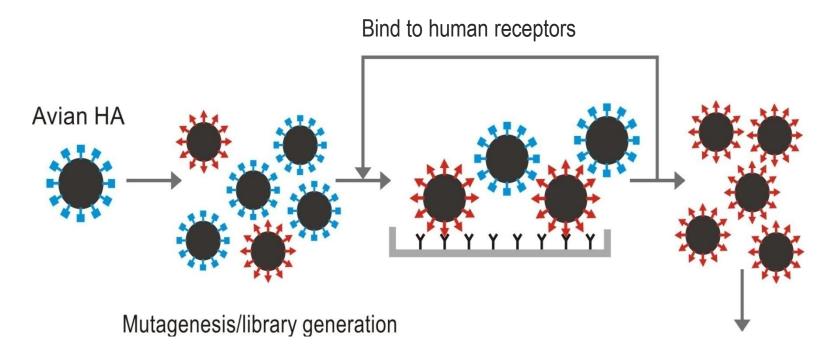
Genetic and Antigenic Evolution of H3N2 HA Sequences



Antigenic distance



"Pre-surveillance": Screening viral protein libraries for pandemic risk assessment



Yoshihiro Kawaoka University of Wisconsin-Madison Sequence DNA
Assess pathogenicity
Antigenic cartography
Antibody reagents

Prospects for Better Vaccines

Current vaccines

New technologies: 5-15 years away

Egg based vaccines

- Lmited yields
- Must predict strain shifts
- Need to revaccinate every year

Improved Adjuvants

Some cross-protection

Recombinant protein production

- Cheaper, rapid scale-up
- Engineer for cross-protection

Distributed Manufacturing

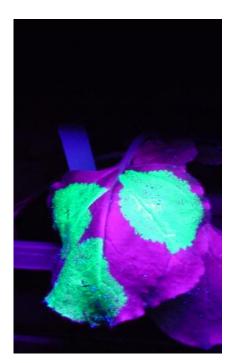
Worldwide access to vaccines

Transient expression in plants

Agrobacterium vector



+ Viral vector 24 hrs after infiltration 48 hrs after infiltration



+ Viral vector



Green fluorescence is indicative of GFP expression

Universal influenza vaccines

- "Conventional" universal vaccine development (e.g. M2e-based vaccines)
- Intensified epitope mapping and T-cell immune correlates of protection
- Anti-idiotypic "templating" using crossprotective monoclonal antibodies

Conclusions

- Clarify burden of disease to encourage appropriate vaccine use
- Create library of high-yield strains to prepare for vaccine production prior to pandemic
- Invest in improved vaccines/technologies to reduce costs and increase access
- Multi-use platforms can increase capacity for vaccines against pandemic influenza and other threats

Questions

BILL& MELINDA
GATES foundation